



SUMMER RECREATION INFORMATION FORM 2015

Name of Participant _____ Phone # _____

Participant's Age _____ Grade Entering in the Fall _____

Please complete both sides of this form. **No student will be allowed to participate in the program without this form being completed and submitted to Summer Staff by the first day of program attendance.**

HOLD HARMLESS AGREEMENT

WAIVER: As a participant, or parent or guardian of a participant, permission is granted to participate in the Mesa Parks and Recreation or Mesa Arts and Cultural program listed below. Participants understand and agree that they may be photographed and/or videotaped for the promotion of City of Mesa programs. I understand that there are risks of physical injury to the participant(s). Considering all possible risks, on behalf of the participant(s), and myself, I voluntarily waive, release, discharge and hold harmless the City of Mesa, its employees, supervisors, appointed officials, agents, representatives and volunteers from all claims for all injuries to participant(s), no matter how severe. Furthermore, I give consent for emergency medical treatment to the participant(s). This waiver does not extend to any such claim or liability that is caused solely and exclusively by the gross negligence of the City of Mesa or its employees, supervisors, appointed officials, agents, representatives and volunteers.

Parent/Guardian Signature _____

Date _____

EMERGENCY INFORMATION (PLEASE PRINT)

Address of Participant _____ City _____

Mother's Name _____ (h) _____ (w) _____

Cell/Pager# _____

Father's Name _____ (h) _____ (w) _____

Cell/Pager# _____

Local Emergency Contact Name: _____ Phone: _____

(other than parent) Cell/Pager _____

Local Emergency Contact Name _____ Phone _____

(other than parent) Cell/Pager _____

Hospital Preference _____ Doctor's Name and Phone Number _____

SWIMMING INFORMATION FOR PROGRAMS THAT GO SWIMMING

If your child will be attending Jefferson Summer Fun Zone Program, check their level of swimming ability. Non-swimmers will be allowed in the shallow end of the pool. Some pools have slides. If your child meets the height requirement of 42 inches, we will allow him/her to go down the slide unless instructed differently by parent/guardian.

All slides are staffed with lifeguards. Child's skill level will be identified by colored wristbands provided by program.

☐ Red-Non-Swimmer
(Close proximity of staff)

☐ Yellow-Beginning Swimmer
(Main Pool only, no dive tank)

☐ Green-Intermediate
(Entire pool area)

☐ Blue-Intermediate*
(Can use 3-meter diving board
*at least 8 yr old and 42 inches)

SUMMER RECREATION FORM (cont)

My child has permission to watch PG movies during Summer Programs

☐ **Yes** ☐ **No**

TRANSPORTATION

Please indicate how your child will be leaving from camp each day.

☐ Walking ☐ Bike/Scooter ☐ Transported by a parent/guardian or car pool

Please list names of ANY persons your child **MAY** be released to:

BEHAVIOR MANAGEMENT

Is there a behavior management technique that works best for your child? (Time Out, Calling Parent, etc)

Is there any other information we need to be aware of to best serve your child? (Special needs, physical or learning disability etc.)

MEDICAL INFORMATION

Please check "Yes" or "No" after each of the following questions. If your answer is "yes" to any of the following questions, please give additional information and/or explanation in the space provided.

Is the participant on Medication? ☐ Yes ☐ No Name of Medication/Dosage/Comments

Does the participant have Seizures? ☐ Yes ☐ No Comments

Does the participant have allergies? ☐ Yes ☐ No Comments

Is the participant Diabetic? ☐ Yes ☐ No Comments

Is the participant allowed to have candy? ☐ Yes ☐ No Comments
